

Affidavit of Fair Competition

(Required)

Please Print or Type in all Spaces except Signature.

Agency Name for Capacity Response Items	Contract Period
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In signing this form we certify that we have not, either directly or indirectly, entered into any agreement or participated in any collusion or otherwise taken any action in restraint of free trade; that no attempt has been made to induce any other person or firm to submit or not to submit a proposal; that this Proposal has been independently arrived at without collusion with any other W-2 agency, except for forming a consortium; that the above statement is accurate under penalty of perjury.

In signing this form we also certify that no relationship exists between our agency and the department that interferes with fair competition or is a conflict of interest, and no relationship exists between our agency and another person or organization that constitutes a conflict of interest with respect to a State contract.

We will comply with all terms, conditions, and response items required by the State in the RFP to Administer W-2 and Related Programs, including the Department's Policies and Procedures, and the terms of our approved Proposal/Plan.

Agency Director Name or Designee (If designee, attach Designee Authorization)	
Signature	Date of Signature